

UNITED STATES DISTRICT COURT
for the
Eastern District of New York

United States of America)	
v.)	
Semyon Bumagin)	Case No. 11 Cr. 800 (WFK)
<hr style="border: 0.5px solid black; margin: 5px 0;"/>		
<i>Defendant</i>)	

SUBPOENA TO TESTIFY AT A HEARING OR TRIAL IN A CRIMINAL CASE

To: Dr. Monica Rivera-Mindt
Neuropsychological Associates of New York, PC
1800 7th Avenue, Suite #9-A
NY, NY 10026

YOU ARE COMMANDED to appear in the United States district court at the time, date, and place shown below to testify in this criminal case. When you arrive, you must remain at the court until the judge or a court officer allows you to leave.

Place of Appearance:	U.S. District Court - Eastern Dist. of NY	Courtroom No.: 6H
	225 Cadman Plaza East Brooklyn, NY 11215	Date and Time: 09/30/2015 9:30 am

You must also bring with you the following documents, electronically stored information, or objects (*blank if not applicable*):

All records in your files pertaining to your prior evaluation of Semyon Bumagin.

(*SEAL*)

Date: _____

CLERK OF COURT

Signature of Clerk or Deputy Clerk

The name, address, e-mail, and telephone number of the attorney representing (*name of party*) _____
_____, who requests this subpoena, are:

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PROOF OF SERVICE

This subpoena for (*name of individual and title, if any*) _____
was received by me on (*date*) _____.

I served the subpoena by delivering a copy to the named person as follows: _____

on (*date*) _____ ; or _____

I returned the subpoena unexecuted because: _____

Unless the subpoena was issued on behalf of the United States, or one of its officers or agents, I have also tendered to the witness fees for one day's attendance, and the mileage allowed by law, in the amount of

\$ _____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00 _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc: